Confidentiality

STATEMENT OF PURPOSE:

All school personnel should follow confidentiality practices required for student education and health records.

AUTHORIZATION/LEGAL REFERENCES:

18 V.S.A. Chapter 21 § 1124 -Access to Records http://www.leg.state.vt.us/statutes/fullsection.cfm?Title=18&Chapter=021&Section=0112

Health Information Portability and Accountability Act (HIPAA) - Omnibus HIPAA Rulemaking: http://www.hhs.gov/ocr/privacy/hipaa/understanding/omnibus/index.html

Vermont Department of Health Immunization Regulations; Retention, Transfer and Release of Records, section X.4

http://healthvermont.gov/hc/imm/documents/VermontImmunizationRegulations.pdf

Joint Guidance on the Application of the Family Educational Rights and Privacy Act (FERPA) and the Health Insurance Portability and Accountability Act of 1996 (HIPAA) To Student Health Records November 2008

http://www.ed.gov/policy/gen/guid/fpco/doc/ferpa-hippa-guidance.pdf

Federal Register; Department of Education 34 CFR part 99; Family Educational Rights and Privacy; final rule 12/9/2008

http://www2.ed.gov/legislation/FedRegister/finrule/2008-4/120908a.pdf

U.S. Department of Education:

Letter to Alabama Department of Education re: Disclosure of Immunization Records (2004) [and other information relevant to confidentiality:

http://www2.ed.gov/policy/gen/guid/fpco/ferpa/library/alhippaa.html

REQUIRED SCHOOL NURSE/ASSOCIATE SCHOOL NURSE ROLES:

- Establish and maintain a separate health record for each student.
- Maintain records in a secure location of active students, or on a secure server for electronic records.
- Obtain written release of information form from parents/guardians regarding the sharing
 of information or obtaining information with professional resources outside of school for
 children under 18 years of age. Students who are 18 years of age are deemed
 independent and must grant consent for sharing of information.
- Establish nursing protocol for sharing of health information that falls under the "duty to warn" parameters with education staff and volunteers.

- This includes requiring that all release of health information from the student health record is done in concert with the school nurse, i.e. individuals requesting information should go through the school nurse so that information can be interpreted within the context of the full picture of the student. [needs revision and verification]/slt
- Know your school district's definition of "legitimate educational interest" and follow procedures when sharing health information with educational staff.
- Establish protocol for storing of sensitive records (i.e. psychiatric evaluations, child abuse reports, hospital reports, substance abuse documents, etc.).
- Establish protocols for phone and electronically transmitted health information.
- Establish protocols for disposition and storage of health records for currently enrolled students as well as disposition of in-active (un-enrolled) students. All school health records are part of the students education file and should be saved for 5 years with all the students' records.
- Each school shall maintain an immunization record for each student. If a student transfers from one school to another, the original school shall transfer the immunization record or a copy thereof. The original school shall keep a log indicating where and when the records were sent. Immunization records not forwarded shall remain with the child's academic record and or health record and shall not be destroyed under any circumstances
- Establish protocols for maintaining confidentiality as it relates to school health services for other personnel, clinic assistants, and other unlicensed volunteers.

Resources

American Nurses Association

ANA's Principles for Social Networking and the Nurse (2011)

http://www.nursesbooks.org/Main-Menu/eBooks/Principles/Social-Networking.aspx

Brous, Edie, (2013) American Nurse Today

How to avoid the pitfalls of social media

http://www.americannursetoday.com/how-to-avoid-the-pitfalls-of-social-media/

Centers for Medicare and Medicaid (2013)

Medical Privacy of Protected Health Information

http://pckeeperapp.zeobit.com/land/7.13/index.php?affid=mzb_195.17368658.1412711222.4.
mzb&utm_source=3intr&utm_medium=popunder&utm_campaign=pck_3intr_us_15aug_ff&utm_term=&utm_content=&userDefiner=mzb_2380&trt=33_22526071&alert=301&tid_ext=305028_274_



Louisiana Legislative Session, Louisiana Revised Statute 17:81(Q). (2009)

Electronic Communications Between Employees and Students Policy

http://pckeeperapp.zeobit.com/land/7.13/index.php?affid=mzb_195.17368658.1412711222.4.

mzb&utm_source=3intr&utm_medium=popunder&utm_campaign=pck_3intr_us_15aug_ff&utm_term=&utm_content=&userDefiner=mzb_2380&trt=33_22526071&alert=301&tid_ext=305028

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National Association of School Nurses HIPAA and FERPA (2013)

http://www.nasn.org/ToolsResources/DocumentationinSchoolHealth/HIPAAandFERPA

Larson, Jennifer (2011) NurseZone.com: *Nursing News: New Principals Guide Nurses in Using Social Media*http://www.nursezone.com/Nursing-News-Events/more-news/New-Principles-Guide-Nurses-in-Using-Social-Media_38004.aspx

National Council on State Boards of Nursing (2011)

White Paper: A Nurses Guide to the Use of Social Media

https://www.ncsbn.org/Social_Media.pdf

Schwab, N.C., Gelfman, M.H.., *Legal Issues in School Health Services*, Sunrise River Press, 2005

Vermont Network Against Domestic and Sexual Violence
Parental Consent and Confidentiality Issues for Working with Teens: Guidelines for Vermont
Advocateshttp://www.vtnetwork.org/wp-content/uploads/2-13-Parental-Consent-andConfidentiality-with-SANE-3.pdf

U.S. Department of Education

FERPA for Parents (2014) http://www2.ed.gov/policy/gen/guid/fpco/ferpa/parents.html

Letter addressing confidentiality and reproductive health: http://www2.ed.gov/policy/gen/guid/fpco/ferpa/parents.html

SAMPLE POLICIES, PROCEDURES, AND FORMS

- Statement of Confidentiality agreement Form
- Release of Information Form

School Letterhead SAMPLE

Authorization for Release of Information

The undersign hereby authorizes the following school staff:	
To exchange information regarding (student name)	
whose date of birth is _	
with the following people, agencies, or health care providers;	
Records to be released/reason for disclosure:	
Trocords to be released, reason for disclosure.	
This authorization expires (check one)	
At the end of the school year	
At the termination of the student's enrollment at	school
Student's signature	Date
Parent/Guardian's signature	Date
School Representative Signature	Date

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School Letterhead SAMPLE

Statement of Confidentiality Agreement

As a school health	n assistant, volunteer or substitute I,		
understand that a	nderstand that all health and medical information, whether verbal or written, is confidential.		
I will treat all health information with the greatest respect and will not discuss or repeat any			
information about a child's health, medical, or psychosocial status.			
Health assistant/v	olunteer or substitute:	_	
Signature:		Date:	
School Nurse;			
Name:		_	
Signature:		Date:	